

Amend CSHB 541 (house committee report) as follows:

(1) Add the following appropriately numbered SECTION to the bill and renumber subsequent SECTIONS of the bill accordingly:

SECTION \_\_\_\_\_. Section 409.022(d), Labor Code, is amended to read as follows:

(d) In this subsection, the terms "corrections employee," "detention officer," "emergency medical technician," "firefighter," and "peace officer" have the meanings assigned by Section 607.051, Government Code. In addition to the other requirements of this section, if an insurance carrier's notice of refusal to pay benefits under Section 409.021 is sent in response to a claim for compensation resulting from a corrections employee's, a detention officer's, an emergency medical technician's, a firefighter's, or a peace officer's disability or death for which a presumption is claimed to be applicable under Subchapter B, Chapter 607, Government Code, the notice must include a statement by the carrier that:

(1) explains why the carrier determined a presumption under that subchapter does not apply to the claim for compensation; and

(2) describes the evidence that the carrier reviewed in making the determination described by Subdivision (1).

(2) On page 7, strike lines 19 through 26 and substitute the following:

(b) Notwithstanding Subsection (a) of this section or Sections 409.003, 410.169, or 410.205, Labor Code, a person who on or after the date the governor declared a disaster under Chapter 418, Government Code, relating to SARS-CoV-2, coronavirus disease 2019 (COVID-19), but before the effective date of this Act, filed a claim for benefits, compensation, or assistance related to SARS-CoV-2, coronavirus disease 2019 (COVID-19), and whose claim was subsequently denied may, on or after the effective date of this Act, request in writing that the insurance carrier reprocess the claim and the changes in law made by this Act shall apply to that claim. A request to reprocess a claim as authorized by this subsection shall be filed not later than one year after the effective date of this Act.

(c) Not later than the 60th day after the date an insurance carrier receives a written request to reprocess a claim under Subsection (b) of this section, the insurance carrier shall reprocess the claim and notify the person in writing whether the carrier accepted or denied the claim. If the insurance carrier denies the claim, the notice must include information on the process for disputing the denial. The notice provided by the insurance carrier must use the notice provisions prescribed by the division of workers' compensation of the Texas Department of Insurance under Subsection (d) of this section.

(d) As soon as practicable after the effective date of this Act, the division of workers' compensation of the Texas Department of Insurance shall prescribe notice provisions for an insurance carrier to use when providing notice of the insurance carrier's acceptance or denial of a person's claim. The notice provisions must be clear and easily understandable.